



Tuberculosis Accelerated Response and Care



Esther Wahomeis reviews her paperwork for proper management of TB drug supply, as dictated by the World Health Organization's Stop TB strategy.

US Presidential Initiative:

President's Emergency Plan for AIDS Relief

Funding Level:

\$40.5 million

Duration:

June 2013 – June 2018

Activity Goals:

Reduce the burden of TB in Kenya

- Support TB and TB/HIV activities in 2,800 health facilities, 1,800 labs, 268 field-based TB coordinators in all 47 counties of Kenya.
- Support the National Tuberculosis Leprosy and Lung Disease Unit to provide leadership and coordination of TB services in Kenya
- Support development, implementation and scale-up of new program areas and interventions
- Provide technical assistance for the local adaptation and scale-up of globally proven TB interventions
- Support monitoring and evaluation of TB

Activity Accomplishments (July 2013 and January 2014):

- 54,180 TB patients diagnosed and treatment started
 - 93% (50,290) of those TB patients tested for HIV
- 87 senior health managers, from all 47 counties, sensitized on TB control by National Tuberculosis

ACTIVITY OVERVIEW

Tuberculosis (TB) Accelerated Response and Care capitalizes on Kenyan expertise and know-how to significantly reduce the burden of TB in Kenya by 2018. The activity was designed by the United States Government in close collaboration with Government of Kenya health managers. The activity is implemented by a local Kenyan Non-Governmental Organization, Center for Health Solutions, which is led by qualified Kenyan health professionals who bring local solutions to the Kenyan people. The activity aims to increase the proportion of TB cases identified and treated to over 95 percent. It is aligned to the health policies and targets set forth in Kenya's Vision 2030.

Kenya has one of the highest TB prevalence rates in the world. But, Kenya has also made tremendous strides in controlling the disease - surpassing the World Health Organization's TB targets by detecting 83 percent of the total estimated number of cases and successfully treating 86 percent of patients diagnosed with TB. Kenya has also experienced a decline in the number of new TB cases reported every year.

Despite these significant achievements, TB remains a major cause of illness and death in Kenya. The high burden of TB is linked to the high prevalence of HIV in Kenya. Co-infection of HIV and TB is common and greatly impacts the ability for patients to fight either disease. Poverty and limited access to health care services are two other major contributing factors to the high burden of TB in Kenya.

ACTIVITY AREAS

Tuberculosis Accelerated Response and Care works to increase the detection rate of TB. To do so, it invests in technology to improve TB and HIV data management and strengthens lab services to provide diagnosis of the disease. The activity has a focus on children and high-risk populations.

ACTIVITY IMPACT

Tuberculosis Accelerated Response and Care coordinates with stakeholders from the public and private sector, other donor groups, and with civil society organizations to ensure maximum effectiveness. The activity has

Leprosy and Lung Disease Unit

- Multidrug-resistant TB patients provided with monthly transport to receive TB treatment

Key Partners:

- Government of Kenya - Ministry of Health:
Division of TB & Leprosy Diseases
- USG implementing partners – PATH, APHIAplus, AMREF
- Private sector- Safaricom, Tangazoletu
- Civil society organization networks – ENGAGE

Activity Locations:

Nationwide with a focus on Mombasa County, Nairobi County, Homa Bay County, Kisumu County and Isiolo County

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helped build consensus for the roles that various governments play in the control of TB in Kenya. The activity has also helped facilitate a tentative way forward in the procurement of anti-TB drugs.



Dr. Samuel Kinyanjui, Chief of Party TB Accelerated Response and Care, presents to the Nairobi County Government at the National Tuberculosis Leprosy and Lung Disease Unit consultative meeting in Nairobi.